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|---|-------------------------------|--------------------------------|------------------|--|--|--|
| PETITION FOR EXTENSION OF TIME UNI | Docket Number (Optional) | | | | | |
| FY 2005 (Fees pursuant to the Consolidated Appropriation | 41489 | | | | | |
| Application Number 10/767,177 | Filed January 30, 2004 | | | | | |
| For Keith R. Carver | | | | | | |
| Art Unit 2833 | | Examiner F. O. Figueroa | | | | |
| This is a request under the provisions of 37 CFR application. | 1.136(a) to extend the period | od for filing a reply in the a | above identified | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | | | | |
| | <u>Fee</u> | Small Entity Fee | | | | |
| One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ | | | |
| Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ | | | |
| Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$_510.00 | | | |
| Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | \$ | | | |
| Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ | | | |
| Applicant claims small entity status. See 37 CFR 1.27. | | | | | | |
| A check in the amount of the fee is enclo | osed. | | | | | |
| Payment by credit card. Form PTO-2038 | 8 is attached. | | | | | |
| The Director has already been authorized to charge fees in this application to a Deposit Account. | | | | | | |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to | | | | | | |
| Deposit Account Number 18-2220 I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. | | | | | | |
| Provide credit card information and authorization on PTO-2038. | | | | | | |
| I am the applicant/inventor. | | | | | | |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). | | | | | | |
| attorney or agent of record. Registration Number | | | | | | |
| attorney or agent under 3 Registration number if acting | 7 CFR 1.34. | | | | | |
| Why M. Goodn | uen | November 3, 200 | 5 | | | |
| Signature | | Date | | | | |
| Alfred N. Goodman | | (202) 659-9076 | | | | |
| Typed or printed name | | Telephone Number | | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | | |
| | ns are submitted. | | : | | | |

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

11/04/2005 HALI11

PTO/SB/17 (12-04)

510.00

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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|--|-----------------|-------------------------------|--------------------------------|------------------------------|--------------------------|--|--|
| Effective on 12/08/2004. S/ Fees pursuant to the Consolvated Appropriations Act, 2005 (H.R. 4818). | | Complete if Known | | | | | |
| Fees pursuant to the Consol | ated Appropria | atio S Act, 2005 (H.R. 4818). | Application Number | 10/767,177 | | | |
| FEE TRANSMITTAL | | Filing Date | Jan. 30; 2004 | | | | |
| Fo | r FY 2 | 005 | First Named Inventor | Keith R. Carver | | | |
| | | 0 07 050 4 07 | Examiner Name | F.O. Figueroa | | | |
| ✓ Applicant claims small entity status. See 37 CFR 1.27 | | Art Unit | 2833 | | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 510.00 | | | Attorney Docket No. | Docket No. 41489 | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | |
| Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 18-2220 Deposit Account Name: Roylance, Abrams, Berdo & Goodman, L.L.P. | | | | | | | |
| | | account, the Director is he | reby authorized to: (chec | k all that apply) | | | |
| Charge fee(s | s) indicated be | elow | Charge fee(s | i) indicated below, exce | ot for the filing fee | | |
| Lamed . | | (s) or underpayments of fe | | verpayments | | | |
| | R 1.16 and 1 | .17 | | · · | ide credit card | | |
| information and authorization | | | iormation should not be in | ciaded on this form. They | iac orcait dara | | |
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEA | | | | | | | |
| | FILING | FEES SEAF Small Entity | RCH FEES EXA Small Entity | MINATION FEES Small Entity | | | |
| Application Type | Fee (\$) | Fee (\$) Fee (\$ | Fee (\$) Fe | e (\$) Fee (\$) | Fees Paid (\$) | | |
| Utility | 300 | 150 500 | 250 20 | 00 100 | | | |
| Design | 200 | 100 100 | 50 13 | 65 | | | |
| Plant | 200 | 100 300 | 150 16 | 60 80 | | | |
| Reissue | 300 | 150 500 | 250 60 | 00 300 | | | |
| Provisional | 200 | 100 0 | 0 | 0 0 | | | |
| 2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 Small Entity Fee (\$) Fee (\$) 25 100 | | | | | | | |
| Multiple dependent claims 360 180 | | | | | | | |
| Total Claims | | | | | | | |
| 39 - 20 or HP = x = 0 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20 | | | | | | | |
| HP = highest number of total claims paid for, if greater than 20 Indep. Claims | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) | | | | | | | |
| for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) | | | | | | | |
| 100 = / 50 = (round up to a whole number) x = | | | | | | | |
| 4. OTHER FEE(S) Non-English Specif | ication. \$ | 130 fee (no small entity | discount) | | Fees Paid (\$) | | |

| SUBMITTED BY | | | | | |
|-------------------|-------------------|--|--------------------------|--|--|
| Signature | alfud M-Goodman | Registration No. (Attorney/Agent) 26,458 | Telephone (202) 659-9076 | | |
| Name (Print/Type) | Alfred N. Goodman | | Date November 3, 2005 | | |

Other: Three Month Extension of Time

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS Apprecias. ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.